Attorney Docket No.: TRAN-P040



MYHENUMITED STATES PATENT AND TRADEMARK OFFICE

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Thereby certify that this transmittal of the below described document is being deposited with the United States Postal Service in an envelope bearing First Class Postage and addressed to the Commissioner for Patents P.O. Box 1450, Alexandria, VA 22313-1450, on the below date of deposit.									
Date of 07/26/ Deposit:	Name of Person Making the Deposit:	KATHERINE RIN	ALDI Signature of the Pe Making the Deposi	erson Kathuruu Runalal.					
In re Application of: H. Peter Anvin, Alexander Klaiber, Guillermo J. Rozas and Parag Gupta									
Application No.: 09/930,625			Examiner: Namaz	i, Mehdi					
Filed: 08/15	/01		Art Unit: 2188						
Confirmation No.: 2203									
For: METHOD AND APPARATUS FOR IMPROVING SEGMENTED MEMORY ADDRESSING									
Commissioner f P.O. Box 1450			RECEIVED						
Alexandria, VA	22313-1450	AMENDME	NT TRANSMITTAL	AUG 0 4 2004					
1. Transm	itted herewith is an am	application	Technology Center 2100						
Transmitted herewith is a response to an office action for the above identified patent application. (8 sheets) Transmitted herewith are sheets of substitute formal drawings. Other:									
2. Applicant is other than a small entity									
Extension of Term									
The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.									
(a) [X]	Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)								
	Extension [X] one mont [] two months [] three mont [] four month	s hs	Fee \$110.00 \$420.00 \$950.00 \$1,480.00						
			Fee \$ 110.00						
If an additional extension of time is required, please consider this a petition therefor.									
(b) [] Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.									

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Fee Calculation

claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(for other than a small entity)								
Fee Items	Claims Remaining After Amendment	Highest Number of Claims Previously Paid For	Present Extra Claims	Fee Rate	Total			
Total Claims	4	- 20 =	0	x \$18.00	\$0.00			
Independent Claims	2	- 3 =	0	x \$86.00	\$0.00			
Multiple Dependent Claim Fee (one or more, first added by this \$290.00 amendment)								
Total Fees								

HECEIVED

PAYMENT OF FEES

AUG 0 4 2004

5. The full fee due in connection with this communication is provided as follows:

Technology Center 2100

- The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit any overpayment to Deposit Account No.: 23-0085. A duplicate copy of this authorization is enclosed.
- [X] A check in the amount of \$110.00
- Charge any fees required or credit any overpayments associated with this filing to Deposit [] Account No.: 23-0085.

Please direct all correspondence concerning the above-identified application to the following address:

WAGNER, MURABITO & HAO LLP

Two North Market Street, Third Floor San Jose, California 95113 (408) 938-9060

Customer No.: 45590

Date: 26 Jly 2014

Respectfully submitted